



State of Idaho

**DEPARTMENT OF HEALTH AND WELFARE**

Division of Medicaid

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**INFORMATIONAL LETTER #92-14**

**DATE:** December 9, 1992

**TO:** LONG TERM CARE ADMINISTRATORS

**FROM:** Jean Schoonover, R.N., Chief  
Bureau of Facility Standards

**SUBJECT:** Dispute Resolution Procedure

On August 4, 1992, we distributed the "Conflict Resolution" procedures to you in Informational Letter #91-10.

Since then, the procedures have been reviewed by a representative of the Idaho Health Care Association and a representative of Western Health Care Corporation. We have renamed the procedures "Dispute Resolution" and have made some changes to the procedures.

Enclosed is your copy of the updated procedures.

If you have any questions, please contact John Hathaway, Supervisor of Long Term Care.

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Jean Schoonover, R.N., Chief  
Bureau of Facility Standards

JS/tm

Enclosure

cc: John Hathaway  
Idaho Health Care Association

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**DISPUTE RESOLUTION PROCEDURE**

1. Active participation in the survey process by the provider is encouraged. Open communication is important throughout the entire procedure. The survey team should ask for and encourage the facility staff to furnish clarifying or missing information as necessary and needed.
2. Members of the survey team will be available for a brief daily meeting with the Administrator and the Director of Nursing Services near the end of each day to request needed information, discuss potentially significant issues, and to assure open communication.
3. Should a significant deficiency exist, a brief meeting will be held with the Administrator prior to the exit conference.
4. Should the provider disagree with the findings of the survey team during the exit conference, the provider will have the right to offer information, documentation, or other necessary resources for the team's review. This should be done at the completion of the exit conference. The survey team should allow at least one (1) hour for the facility to gather the information, review, and evaluate it.

If the facility has been able to resolve the finding of non-compliance with appropriate data before the team leaves the facility, the deficiency will not appear on the HCFA-2567 form.

5. If there are deficiencies that the survey team and provider have been unable to resolve, the provider may advise the team at the exit conference that a meeting will be requested with the Long Term Care Supervisor before the HCFA-2567 form is sent to the facility for response. This meeting must be arranged and completed as quickly as possible and within two (2) working days of the exit conference.

6. Following the meeting with the Long Term Care Supervisor, a decision will be made by the licensing and certification agency whether or not changes should be made regarding any deficiencies. The Long Term Care supervisor will contact the facility representative by telephone to report the decision. If the facility representative is not accessible, the cover letter with the HCFA-2567 will provide rationale for the licensing and certification decision.
7. When open lines of communication, meetings with the Department, and the procedures outlined in the resolution process have failed to resolve deficiencies appearing on the HCFA-2567 form, the provider will dispute the report in a professional manner on the HCFA-2567 form.

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